

Issue Classification				Application/Control No.		Applicant(s)/Patent under Reexamination	
				09/650,045		GEDDES JR. ET AL.	
Examiner				Art Unit			
Marissa Thein				3627			

ORIGINAL				CROSS REFERENCE(S)			
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
705	26	705	1	17	27		
INTERNATIONAL CLASSIFICATION							
G	0	6	Q	30/00			
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				/			
				/			
				/			
<i>M.JL</i> M. Thein (Assistant Examiner) <i>7-8-07</i> <i>J. Smith</i> (Legal Instruments Examiner) <i>6/2/07</i>				 <i>F. Zeender</i> (Primary Examiner) <i>6/3/07</i>			
				Total Claims Allowed: 12 O.G. Print Claim(s) 1 O.G. Print Fig. 3			

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
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7		37	67	97	127	157	187
8		38	68	98	128	158	188
9		39	69	99	129	159	189
10		40	70	100	130	160	190
11		41	71	101	131	161	191
12		42	72	102	132	162	192
13		43	73	103	133	163	193
14		44	74	104	134	164	194
15		45	75	105	135	165	195
16		46	76	106	136	166	196
17		47	77	107	137	167	197
18		48	78	108	138	168	198
19		49	79	109	139	169	199
20		50	80	110	140	170	200
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22		52	82	112	142	172	202
23		53	83	113	143	173	203
24		54	84	114	144	174	204
25		55	85	115	145	175	205
26		56	86	116	146	176	206
27		57	87	117	147	177	207
28		58	88	118	148	178	208
29		59	89	119	149	179	209
30		60	90	120	150	180	210

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	Examiner Marissa Thein	Art Unit 3627

ISSUE CLASSIFICATION

ORIGINAL			CROSS REFERENCE(S)					
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
705	26	705	1	17	27			
INTERNATIONAL CLASSIFICATION								
G	0	6	Q	30/00				
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				/				
				/				
				/				
<i>m</i> <i>7</i> M. Thein <i>7-8-07</i> (Assistant Examiner) (Date)			<i>P. Z.</i> <i>6/8/07</i> F. RYAN ZEENDER SUPervisory Patent Examiner (Primary Examiner) (Date)					
<i>J. L. Williams</i> <i>6/10/07</i> (Legal Instruments Examiner) (Date)								
Total Claims Allowed: 12 O.G. Print Claim(s) 1 O.G. Print Fig. 3								

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
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220		250		280		340	
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222		252		282		342	
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224		254		284		344	
225		255		285		345	
226		256	1	286		346	
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234		264	7	294		354	
235		265	8	295		355	
236		266	6	296		356	
237		267	12	297		357	
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240		270		300		360	